

Please Direct All Correspondence to Customer Number **20995****AMENDMENT / RESPONSE TRANSMITTAL**

Applicant : Hutton et al.
 App. No : 10/007,641
 Filed : November 6, 2001
 For : COMPLIANCE AUDIT FOR
 INTEGRATED EMERGENCY
 MEDICAL TRANSPORTATION
 DATABASE SYSTEM
 Examiner : Linh Giang Le
 Art Unit : 3626

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

September 1, 2006

(Date)

Raimond J. Salenicks
 Raimond J. Salenicks, Reg. No. 37.924

Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment in 9 pages.
- (X) Information Disclosure Statement and PTO/SB/08 form (3 pages) listing 39 references (7 enclosed).

The fee has been calculated as shown below:

The present application qualifies for Small Entity Status under 37 CFR 1.27.

| FEE CALCULATION | | | | |
|----------------------------------|-------------|--------------|----------------------|--------------|
| FEE TYPE | | FEE CODE | CALCULATION | TOTAL |
| Excess Claims | 13 - 20 = 0 | 2202 (\$25) | 0 x 25 = | \$0 |
| Excess Independent | 3 - 3 = 0 | 2201 (\$100) | 0 x 100 = | \$0 |
| Information Disclosure Statement | 1.17(p) | 1806 (\$180) | | \$180 |
| 3 Month Extension | 1.17(a)(3) | 2253 (\$510) | | \$510 |
| | | | TOTAL FEE DUE | \$690 |

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02 FC:2253

510.00 OP

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- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$690 is enclosed.
- (X) Return prepaid postcard.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Raimond J. Salenieks
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Agent of Record
Customer No. 20,995
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